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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG-174

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator A. C. Holder	8. Farm or Lease Name State BC
3. Address of Operator Box 1476, Lovington, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER L 1980 FEET FROM THE South LINE AND 608.5 FEET FROM THE West LINE, SECTION 31 TOWNSHIP 7 South RANGE 36 East NMPM.	10. Field and Pool, or Wildcat Todd San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4144.5 GL	12. County Roosevelt

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Work began 4-16-68.
Pulled Rods and Tubing.
Perforated 4318 to 4326 one jet shot per foot.
Set Packer above new perforations.
Acidized with 2,000 gal. 28% acid.
Flushed with 2,000 gal. water.
Swabbed.
Put back on pump 4-20-68.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *A. C. Holder* TITLE **Operator** DATE **4-22-68**

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: